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CONFIRMATION NO. 5438

<b>SERIAL NUMBER</b> 10/758,378	<b>FILING OR 371(c) DATE</b> 01/15/2004 <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3771	<b>ATTORNEY DOCKET NO.</b> 4204P2750
<b>APPLICANTS</b> Lucky Campbell, Phoenix, AZ; <b>** CONTINUING DATA *****</b> <i>KCM</i> This appln claims benefit of 60/451,688 03/04/2003 <b>** FOREIGN APPLICATIONS *****</b> <i>NONE KCM</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 04/28/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>KCM</i> Acknowledged <i>KCM</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> AZ	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 8
			<b>INDEPENDENT CLAIMS</b> 3	
<b>ADDRESS</b> 23504				
<b>TITLE</b> Switching apparatus and method for oxygen delivery system				
<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	